## SECOND REGULAR SESSION

## SENATE BILL NO. 577

## 96TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR GOODMAN.

Pre-filed December 21, 2011, and ordered printed.

4814S.01I

TERRY L. SPIELER, Secretary.

## AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to requiring health benefit plans to establish equal out-of-pocket requirements for oral anticancer medications and intravenously administered chemotherapy medications.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapter 376, RSMo, is amended by adding thereto one new 2 section, to be known as section 376.1257, to read as follows:

376.1257. 1. Any health benefit plan that provides coverage and benefits for cancer chemotherapy treatment shall not require a higher copayment, deductible, or coinsurance amount for a prescribed, or ally administered anticancer medication that is used to kill or slow the growth of cancerous cells than what the plan requires for an intravenously administered or injected cancer medication that is provided, regardless of formulation or benefit category determination by the health carrier administering the health benefit plan.

- 2. A health carrier shall not achieve compliance with the provisions of this section by imposing an increase in copayment, deductible, or coinsurance amount for an intravenously administered or injected cancer chemotherapy agent covered under the health benefit plan.
- 3. Nothing in this section shall be interpreted to prohibit a health carrier from requiring prior authorization or imposing other appropriate utilization controls in approving coverage for any chemotherapy.
- 4. The provisions of this section shall not apply to a supplemental insurance policy, including a life care contract,

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20 accident-only policy, specified disease policy, hospital policy providing

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- 21 a fixed daily benefit only, Medicare supplement policy, long-term care
- 22 policy, short-term major medical policies of six months or less duration,
- or any other supplemental policy as determined by the director of the
- 24 department of insurance, financial institutions and professional
- 25 registration.
- 5. As used in this section, the terms "health benefit plan" and
- 27 "health carrier" shall have the same meanings ascribed to such terms
- 28 in section 376.1350.

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